CITY OF BEDFORD, OHIO **Income Tax Return 2015**

P.O. Box 72450, Cleveland, Ohio 44192-0002 (440) 735-6505

DUE BY APRIL 15, 2016 OR THE IRS DUE DATE

IF YOU	MOVED	SINCE	JANUA	RY 1,	201
	COMP	LETE 1	HIS BOX	(.	

Present Address	City	State	Zip
Old Address	City	State	Zip



www.bedfordoh.gov

F	Phone #					Email Address: 1	tax@bedfordoh.gov
	NAME A	ND ADDRESS (Print	or type)				
						Your Social S	ecurity Number
						Tour Social Si	econty Number
						Spouse's Social	Security Number
Z	Location Where Ea (As shown on W-2		COLUMN 1A	COLUMN 1B	CA	UTION: A copy of all W-2 MUST be attached.	2 Forms
Ĕ	Caution: List separately v	vages earned	Total Wages	Withheld for	COLUMN 1C	COLUMN 1D	COLUMN 1E
SNE	BEDFORD		(As shown on W-2 Form)	Bedford \$			
COMPENSATION	DED! OND		-	*	Withheld for Other Cities	1.5% of Column 1A	Lesser of Column 1C or 1D
	Other Communities	Municipality			\$	\$	\$
AND	List Separately				\$	\$	\$
ES /							
WAGES							
7.							
	COLUMN	TOTALS	\$	\$			\$
			Post (To Line 2a)	Post (To Line 4b)			Post (To Line 4c)
3	b. Total other income all other Income - 3 c. Total (Add lines 2a d. BEDFORD CITY TAX 2. d. PAYMENTS AND CRED a. Estimated payment year overpayment of b. Withheld for Bedfor c. Credit for other cities	(Federal Schedu See Instructions and 2b)		4a	and 2b		
			e Instructions) les 4a through 4d)			4e.	
5	. BALANCE of tax due [d	overpaid] subtra					
6	. PENALTY AND INTERE		b. Interest (1 1/2% Per	month) \$	(Add line 6	Sa and 6h) 65 €	Name of the Control o
7	. BALANCE DUE (combin					bedfordoh.gov) 7. \$	
	. OVERPAYMENT (If line						
	8a. Refund (If \$	5.00 or more) _		8b.	edit to 2016 Estimated	Tax 8	
9	. ESTIMATED TAX (See In	nstructions)					
	 a. Estimated tax liabili b. Quarterly estimated 	ty for 2016	9a less credit from 8b		9a	Oh ¢	
	b. Quarterly estimated	i tax due 1/4 or	sa less credit from ob		•••••	9D. ֆ	
1	TOTAL DUE City of Bed	ford (Add lines	7 and 9b) (credit card pa	yments available a	at www.bedfordoh.gov)	10. \$	
			le to City of Bedford if \$		NO D VEO	- MAINE	
the s	HAVE YOU RECEIV nder penalties of perjury, the understame as used for Federal Income Tax will be filed within 3 months. CHE	gned declares that the	is return (and accompanying sch	nedules) is a true, correctice of statute, and if an		axable period stated and that	
	Signature		C	Preparer's	signature (other than taxpaye	n	Date
	Signature of spouse (If joint return)			Date Address (and Zip Code)		Phone No.



NOW IT'S EVEN EASIER TO PREPARE YOUR CITY OF BEDFORD TAX RETURN

GO TO <u>WWW.BEDFORDOH.GOV</u> AND FOLLOW THE EASY INSTRUCTIONS UNDER THE HEADING INCOME TAX DEPARTMENT

- 1. ANSWER A FEW SIMPLE QUESTIONS AND YOUR RETURN IS READY TO PRINT
- 2. ATTACH YOUR W2s AND/OR SCHEDULES, SIGN THE RETURN AND MAIL (U.S. POST OFFICE) THE RETURN TO THE CITY

IT'S THAT SIMPLE

CITY OF BEDFORD TAX DEPARTMENT (440) 735-6505

ESTIMATED PAYMENTS AND CREDITS TO DATE ARE ALSO AVAILABLE ONLINE

CITY OF BEDFORD

INDIVIDUAL INCOME TAX RETURN INSTRUCTIONS

NOW AVAILABLE FREE TO THE PUBLIC: THE ON-LINE MUNICIPAL INCOME TAX PREPARATION PROGRAM AT: www.bedfordoh.gov

GENERAL INSTRUCTIONS

WHO MUST FILE:

Every Resident 18 years or older and lived in the City of Bedford at anytime during the tax year.

You lived in Bedford and had no Earned Income. (See retired and/or disabled comment below).

You worked in Bedford during the year and had no Bedford City Income Tax withheld from your income.

You operated a Business in Bedford (Federal Schedule C) during any part of the tax year.

You owned Rental Property in Bedford (Federal Schedule E) and collected rent during any part of the tax year.

A Return must be filed even though a Declaration of Estimated Tax has been filed and paid.

Persons under Eighteen (18) years of age are not subject to the tax. If Bedford tax was withheld from their wages, a refund should be requested.

EFFECTIVE FOR THE TAX YEAR 2002, RETIRED AND/OR PERMANENTLY DISABLED RESIDENTS WITH NO EARNED INCOME (SEE INCOME TAXED BY CITIES) ARE NOT REQUIRED TO FILE A TAX RETURN, PROVIDED THAT THE TAXPAYER HAS FILED A PREVIOUS YEAR'S TAX RETURN ESTABLISHING RESIDENCY.

FILING DEADLINE: On or before April 15th or the IRS Due Date following the close of the calendar year. If the return is made for a fiscal year or any period less than a year, file within four (4) months from the end of the fiscal year or other period.

PENALTIES AND INTEREST

Are imposed for failure to file a return or pay the tax due or failure to have 90% or more of the tax due paid in on estimates. Failure to pay the tax due by April 15th or the IRS Due Date is considered to be past due and your account is subject to be sent to Collection at your expense. Please notify this office by mailling the City of Bedford Tax Department a copy of your Federal Extension. This extension must be received by the date of the return or a \$25.00 penalty and interest will be assessed.

* Note: Extensions do not apply to Declarations of Estimated Tax, Joint Returns – Filing a joint return is acceptable.

PAYMENTS

Payments will be applied to oldest years (penalties, interest, collection Fee's and principal tax balance due) to the most current year.

INCOME TAXED BY CITIES

You must report all your income regardless of the income's origin or characteristics including: wages, salaries, commissions, other compensation including fees, sick pay, bonuses, tips, rents, profits from businesses, including professional associations and partnerships, royalties, employer supplemental unemployment benefits (subpay), wage continuation plans, contest prizes and awards, earned income derived from gaming, wagering, lotteries including the Ohio Lottery's prizes and payment, dismissed or severance pay, incentive payments, property in lieu of cash, depreciation recapture and other compensation earned, received or accrued. Your contribution to retirement plans, annuities or Independent Retirement Accounts (IRAs) and all deferred compensation plans ARE taxed by cities. W-2 Income may not be offset by losses from Schedule C or E.

INCOME NOT TAXABLE

Includes dividends, interest, military pay, and allowances, insurance proceeds, pensions, annulties, alimony, social security, medicare, poor relief, unemployment insurance benefits, gifts, inheritances, scholarships, disability benefits, royalties, Section 125 deductions and other revenue from intangible property. The income of religious, fraternal, charitable or other non-profit associations are exempt from the tax if exempt from real estate tax or exempt by enumeration in section 718.01 of the Ohio Revised Code or section 501 (a) of the Internal Revenue Code.

SPECIFIC INSTRUCTIONS

If you moved since January 1 of this tax year, complete the box in the top center of the return. Taxable income and withholding are to be apportioned to the number of months lived in Bedford to 12 months, if Taxpayer is not a full year resident. BOTH THE WAGES AND THE WITHHOLDINGS MUST BE PRORATED PRIOR TO CALCULATING THE RETURN.

Please complete or update the name and address information and Social Security number(s) where requested on form.

SECTION 1 - WAGES AND COMPENSATION (from W-2s Only)

COLUMN 1

This column is created to help the taxpayer compute separately the tax due from earned income in Bedford vs earned income in other communities. The community you have earned your income in is stated on your W-2 form or by the physical location of your work place. If you worked in Bedford you will enter your dollar amount of total wages and Bedford withholding to the right of "Bedford" in column 1A and column 1B respectively. If you worked in a community OTHER THAN Bedford (such as Cleveland) you would write "Cleveland" under the municipality heading and enter your wage income earned in Cleveland to the right of Cleveland in column 1A. This is the same for all other communities. (See Sample Worksheet). If you have wage income earned in a community OTHER THAN Bedford and withholding is taken out for Bedford and the other community, please list under the other communities section in column 1 with the corresponding TOTAL WAGES posted to the right of this city in column 1A. Post Bedford withholding on column 1B and other community withholding in column 1C.

COLUMN 1A

Please enter total wages as noted on W-2 form in this column which is right of the city listed where wages were earned in Column 1.

NOTE:

The largest dollar amount in wage areas on the W-2 form is the amount taxable by the cities (deferred compensation plans and deferred retirement plans ARE taxed by the city).

COLUMN 1B

Please enter any amount of taxes withheld for the City of Bedford in this column. These entries should align to the right of the city where wages were earned.

COLUMN 1C

Please enter taxes withheld for other cities where wages were earned. Please list separately in row with a municipality listed in Column 1.

COLUMN 1D

Multiply .015 times each amount entered in Column 1A under OTHER COMMUNITIES and enter each result on the same row in Column 1D.

CREDIT IS TO BE COMPUTED ON WAGES SUBJECT TO PROPER WITHHOLDING.

IF YOU HAVE ANY QUESTIONS REGARDING THIS MATTER, PLEASE CALL THE BEDFORD CITY TAX DEPT. AT (440) 735-6505.

COLUMN 1E

Enter the smaller of Column 1C or 1D.
Add entries in Column 1A, post total to line 2A
Add entries in Column 1B, post total to line 4B
Add entries in Column 1E, post total to line 4C

LINE 2 INCOME

- A. This amount is taken from Column 1A total.
- B. Total other income is defined as all other earned income not reported on a W-2. (See income taxed by cities). NOTE: Income from wagering, schemes of chance, including, but not limited to the Ohlo Lottery are to be included on this line. Losses cannot offset gains to calculate total other income, losses cannot offset W-2 wages.

Effective January 1, 2009, the City will not allow net operating loss, (NOL) carry forwards. Additionally, any prior year (s) NOL carry forwards will not be allowed to be applied beyond the calendar year 2008.

C. Total (Add lines 2a and 2b).

LINE 3

Bedford City tax (multiply Line 2C times tax rate of 2.25%).

LINE 4 PAYMENTS AND CREDITS

- A. This amount is the City's record of your estimates paid and prior year overpayment credit as of the date stated on the form.
- B. This amount is taken from Column 1B total.
- C. This amount is taken from Column 1E total.
- D. Direct payments to other cities this credit applies only if income is posted to line 2B. If direct payments were made to other cities for local taxes, the City of Bedford will allow you to enter a credit limited to the smaller of 1.50% of your other income (Business income, rental property, etc.) or the actual amount of the tax paid to the other city. ATTACH COPY OF OTHER CITY TAX RETURN.

For more information go to www.bedfordoh.gov.

LINE 5 BALANCE OF TAX DUE (OVERPAYMENT) Subtract line 4E from line 3.

LINE 6 PENALTY AND INTEREST

- A. If the return is not filed by April 15th or the IRS Due Date and no extension was granted, a penalty is to be paid in the amount of \$25.00
- B. If the return is not filed or tax due is not paid before April 15th or the IRS Due Date interest is to be paid at a rate of 1 1/2% per month on the balance due on line 5.
- C. Add lines 6A and 6B

LINE 7 BALANCE DUE

Add lines 5 and 6C.

LINE 8 OVERPAYMENT

If line 7 is less than zero you are entitled to a refund (if \$5.00 or more) or

credit carried forward to the next tax year. Please indicate your choice by placing an X in the box on line 8A if you choose to receive a refund or 8B if you choose to receive a credit.

LINE 9

A. Estimated Tax Liability

This is the amount of expected tax balance due the city for the next tax year. Use line 5, plus 4A, as a basis for this estimated amount of tax due.

B. Divide the amount on line 9A by 4.

LINE 10 TOTAL DUE THE CITY OF BEDFORD

Add lines 7 and 9B and enter the final results. This amount must be paid when your return is filed. Returns received without payment are subject to a \$25.00 penalty plus 1 1/2% per month interest charge. Be sure to write your Social Security Number on your check or money order. If the balance due is less than \$5.00 payment need not be made. Credit Card and Electronic payments can be made on-line at www.bedfordoh.gov.

PLEASE SIGN YOUR NAME AND OBTAIN SPOUSE'S SIGNATURE ON A JOINT RETURN AND DATE OF SIGNATURE MUST BE ENTERED

TAXPAYER MUST ATTACH COPIES OF W-2 STATEMENTS, THEIR COPIES OF FEDERAL FORMS 1040 Schedule C, 1040 Schedule E, 1065K AND 1099 - WHICHEVER IS APPLICABLE. INCLUDE A SUMMARY SHEET IF NECESSARY.

THE RETURN IS NOT COMPLETE UNLESS THIS DATA IS PROVIDED

Electronically prepared returns must be printed signed and mailed with a copy of the return, your W2's and or schedule to this return.

W-2 INFORMATION (FOR EXAMPLE)

1. Mr. Taxpayer SSN 000-00-0000

 Local Wages
 Local Tax
 Work City

 Box 18
 Box 19
 Box 20

 \$20,000.00
 \$200.00
 Hudson

2. Mr. Taxpayer SSN 000-00-0000

Local Wages	Local Tax	Work City
Box 18	Box 19	Box 20
\$15,000.00	\$337.50	Bedford

3. Mrs. Taxpayer SSN 999-99-9999

Local Wages	Local Tax	Work City
Box 18	Box 19	Box 20
\$8.931.86	\$178.64	Cleveland

CITY OF BEDFOR			JE Y	COMED SMOOTH DO	SPICE JAN LETE TH'S	UARY 1, 20 BOX.						
Income Tax Retur P.O. BOX 724											OF THE REAL	
Cleveland, Ohio 44			Fresent Addres	15	Cty	5°rte	Zφ				\$ 6000 A	
(440) 735-656	05		Okt Address		Cry	Sure	Zo.				8,79113	
JE BY APRIL 15,	00		Data of Mova							wwn	" રે જ જે" v.bedfordoh.go	
	E AV.D ADDFESS (F)	l	CATA OL MOM		1							
									0 00			
Mr. & Mrs. Tax					1		Yo	u Social	Security Num	ter		
999 Turney Ro Bedford, Ohio									9 9 9			
-					<u> </u>		Spo.	se's Soc	al Security No.	rter		
WAGES AND COMPE Location Where E							CAI	mon-	lis la waa A	W-2 For	ne .	
As shown on W-2	2 Form)		COLUMN TA		JUN 1B	1		UTION: A copy of all W-2 Form: <u>\$RUST</u> be attached.				
Caution: List separately in Bedford and other C		Total Wages (As shown on W-2 Form)		Withheld for Bedford		COLUMN 1G		COLUMN 1D			COLUVN 1E	
BEDFORO	 Anglikalististististis Anglikalististististististis 	\$ 15,00	00.00	3 33	7.50		hheid for er Crões	1	1,5% of Column 1A		Lesser of Column 10 or 10	
Other Communities	Municipality					\$		\$		\$		
List Separately	Hudson		00.00				00.00	\$	300.00	\$	200.00	
	Cleveland	8,931	.86j			ļ <u>1</u>	78.64	+-	133.97	-+	133.97	
								1				
0011111	N TOTALS	\$ 43.9	24.00	\$ 33	7.60						000.07	
COLOMI	N IOIALS	Fost (To	31.86 Line 22		7.50 o Line 46i	J				\$	333.97 Post (To Lize 4c)	
 b. Total other incoma all other incoma 	me (Federal Sche - Sea Instructio	edule C), Ren	ital income	(Federal S	Schedule I	and				20	43,931.86	
 b. Total other income all other income c. Total (Add lines 3. BEDFORD CITY TAX 	me (Federal Scha - Sea Instructio 2a and 2b) (2.25 Multiply	edule C), Ren	ital income	(Federal S	Schedule I	and	2b			2c 3. \$	43,931.86 988.47	
b. Total other income all other income c. Total (Add Enes 3. BEDFORD CITY TA) 4. PAYMENTS AND CF a. Estimated paym	me (Federal Sche - See Instruction 2a and 2b) (2.25 (Multiply REDITS vents and prior	eduse C), Ren	tal income	(Federal S	Schedule I	E) and	2b			2c 3. \$	43,931.86 988.47	
b. Total other income all other income c. Total (Add Enes 3. BEDFORD CITY TA) 4. PAYMENTS AND CF a. Estimated paym	me (Federal Sche - See Instruction 2a and 2b) (2.25 (Multiply REDITS vents and prior	eduse C), Ren	tal income	(Federal S	Schedule I	E) and	2b			2c, 3. \$	43,931.86 988.47	
b. Total other incore all other income c. Total (Add Enes 3. BEDFORD CITY TA) 4. PAYMENTS AND CR	me (Federal Sche - See Instruction 2a and 2b)	edule C), Renns	. 0225	(Federal :	Schedule I	50 and	2b			2c 3. \$	43,931.86 988.47	
b. Total other income all other income c. Total (Add Enes 3. BEDFORD CITY TA) PAYMENTS AND CF a. Estimated paymyear overpayme b. Withheld for Ber c. Credit for other d. Direct payments.	me (Federal Scha - See Instruction 2a and 2b)	arkrie C), Rem	. 0225)	(Federal S	337, 333.	50 97	26	**********			988.47	
total other income all other income all other income c. Total (Add Enes S. BEDFORD CITY TAX 4. PAYMENTS AND CF a. Estimated payme year overpayme b. Withheld for Ber c. Credit for other d. Direct payments e. Total payments e. Total payments	me (Federal Scheine (Federal Scheine See Instruction 2a and 2b)	skule C), Rer ns	. 0225)	(Federal S	337, 333.	50 97	2b			40	43,931.86 988.47 671.48 316.99	
b. Total other incora all other incora c. Total (Add Enes 3. BEDFORD CITY TA 4. PAYMENTS AND CF a. Estimated paym year overpayme b. Withheld for Bec c. Credit for other d. Direct payments 6. BALANCE of tax du 6. PENALTY AND HTE	me (Federal Schale – See Instruction – See Instruction 29 and 29)	fine 2c times See Instructic Fines 4a thro	. 0225)	4a. 4b. 4d.	337, 333.	50 97	26			40	988.47 671.48	
b. Total other incore all other income c. Total (Add Enes S. BEDFORD CITY TAX 4. PAYMENTS AND OF a. Estimated payme b. Withheld for Bec c. Credit for other d. Direct payments e. Total payments 6. BALANCE of tax du 6. PENALTY AND INTE a. Late Filing: Pena.	me (Federal Scholus – See Instruction – See Instruction 25)	fine 2c times fine 2c times fine 4c times fine 4c times	.0225)	4a. 4b. 4d.	337, 333.	50 97	2b	a 63 an	d 66)	40 5. \$ 6c. \$	988.47 671.48 316.99	
b. Total other incore all other incore all other income c. Total (Add Enes S. BEDFORD CITY TAX 4. PAYMENTS AND CF a. Estimated payme b. Withheld for Ber c. Credit for other d. Direct payments e. Total payments 6. Total payment for the pay	me (Federal Schein – See Instruction – See Instruction – 2e and 29) and 29 years – 2.25 (Multiply REDITS – 2.25 (Multiply REDI	fine 2c times See Instruction Fines 4a throckract fine 4e b. Interes 6c)	.0225)	4a. 4b. 4d.	337, 333.	50 97	2b	a 63 an	d 66)	40 5. \$ 6c. \$	988.47 671.48 316.99	
b. Total other incore all other incore all other income c. Total (Add Enes S. BEDFORD CITY TAX 4. PAYMENTS AND CF a. Estimated payme b. Withheld for Ber c. Credit for other d. Direct payments e. Total payments 6. Total payment for the pay	me (Federal Sche - See Instructio 22 and 25)	See Instruction See Instruction Fine 4e b. Interes 5c) Let 100 b. Interes 5c) Let 200 Let 200	. 0225 . 0225 	4a. 4b. 4c. 4d.	337, 333,	50 97		a 63 an	d 6b)	40 5. \$ 6c. \$	988.47 671.48 316.99	
b. Total other income all other income c. Total (Add Enes 3. BEDFORD CITY TAX 4. PAYMENTS AND OF a. Estimated paym year overpayme b. Withheld for Bec c. Credit for other d. Direct payments e. Total payments 6. BALANCE of tax du 6. PENALTY AND INTE a. Late Filing: Pen 7. BALANCE DUE (con 8. OVERPAYMENT (It is 8a	me (Federal Sche - See Instruction 2.2 and 20) x 2.25(Mutiply REDITS bents and prior ant credit (As of_ diord (From 18). cibles (From 18). cibles (From 18). cibles (From 18). and credits (Add e (overpald) sub- (REST ant) (\$25) \$_ mbine lines 6 and ne 7 is less than if \$5.00 or more)	See Instruction See Instruction Fine 4e b. Interes 5c) Let 100 b. Interes 5c) Let 200 Let 200	. 0225 . 0225 	4a. 4b. 4c. 4d.	337, 333,	50 97	(Add lin	a 6a an	d 6b)	40 5. \$ 6c. \$ 7. \$	988.47 671.48 316.99	
b. Total other income all other income c. Total (Add Enes a. BEDFORD CITY TAJ 4. PAYMENTS AND CF a. Estimated paymeyear overpayme b. Withheld for Bec. C. Credit for other d. Direct payments e. Total payments. b. BALANCE of tax do. 6. PENALTY AND INTE a. Late Filing: Per J. BALANCE DUE (cor 8. OVERPAYMENT (it 8. 2. Refund (9. ESTIMATED TAX (Se a. Estimated tax lie.)	me (Federal Sche - See Instructio 2 and 2b) (X 2.25(Mutiply REDITS Rents and prior nit credit (As of _ diord (From 18). cities (From 18). s to other cities (5 and credits (Add e [overpald] sub- IREST valy (\$25) \$_ hibrine fines 6 and ne 7 is less than if \$5.00 or more) se instructions) selective for 20_ enter fine fines for 20_ enter fines fines for 20_ enter fines fi	ine 2c times See instructiones 4 three tractions 4 three tractions 6c) In ineres 6c) In interes 6c)	.0225)	(Federal 8	337, 333,	50 97 	(Add lin	e 6a an	d 6b)	46 5. \$ 6c. \$ 7. \$ 8	988.47 671.48 316.99	
b. Total other incore all other income c. Total Add Enes. 3. BEDFORD CITY TAX 4. PAYMENTS AND CF. a. Estimated payme b. Withheld for Bec. c. Credit for other d. Direct payments. 6. Total payments. 5. BALANCE of tax du. 6. PENALTY AND INTE a. Leto Filing: Pen. 7. BALANCE DUE (con. 8. OYERPAYMENT (If is. 8.2	me (Federal Sche - See Instructio 2 and 2b) (X 2.25(Mutiply REDITS Rents and prior nit credit (As of _ diord (From 18). cities (From 18). s to other cities (5 and credits (Add e [overpald] sub- IREST valy (\$25) \$_ hibrine fines 6 and ne 7 is less than if \$5.00 or more) se instructions) selective for 20_ enter fine fines for 20_ enter fines fines for 20_ enter fines fi	ine 2c times See instructiones 4 three tractions 4 three tractions 6c) In ineres 6c) In interes 6c)	.0225)	(Federal 8	337, 333,	50 97 	(Add lin	e 6a an	d 6b)	46 5. \$ 6c. \$ 7. \$ 8	988.47 671.48 316.99	
b. Total other income all other income c. Total (Add Enes a. BEDFORD CITY TAJ 4. PAYMENTS AND CF a. Estimated paymeyear overpayme b. Withheld for Bec. C. Credit for other d. Direct payments e. Total payments. b. BALANCE of tax do. 6. PENALTY AND INTE a. Late Filing: Per J. BALANCE DUE (cor 8. OVERPAYMENT (it 8. 2. Refund (9. ESTIMATED TAX (Se a. Estimated tax lie.)	me (Federal Sche - See Instructio 2 and 20) x 2.25(Mutiply REDITS bents and prior not credit (As of_ diord (From 18). cides (From 18). cides (From 18). cides (From 18). and credits (Add e foverpaid) sub- (sand credits (Add e foverpaid) sub- (satt) (\$25) \$_ nbine lines 6 and ne 7 is less than if \$5.00 or more) be instructions) ability for 20_ tited tax due 174 of	See Instruction See Instruction From 4e b. Interes Ecol. Journal Jour	0225)	4a. 4b. 4c. 4d. 4d. 4d. 4d. 4d.	337, 333.	50 97 ered1 to 20	(Add lin	e 6a an	d 6b)	40	988.47 671.48 316.99	
b. Total other income all other income c. Total (Add Enes) 3. BEDFORD CITY TAX 4. PAYMENTS AND OF a. Estimated paym year overpayme b. Withheld for Bec c. Credit for other d. Direct payments e. Total payments 6. BALANCE of tax du 6. PENALTY AND INTE a. Late Filing: Pen 7. BALANCE DUE (con 8. OVERPAYMENT (It is 8a Refund (9. ESTIMATED TAX (Se a. Estimated tax is b. Oxarterly estima 10. TOTAL DUE City of 6	me (Federal Sche - See Instructio 22 and 25) X 2.25(Mutiply REDITS Beels and prior and credit (As of _ diord (From 18). cities (From 18). a to other cities (5 and credit (As) Beels and credit (As) Beels and credit (As) Beels (From 18). Cities (From	ine 2c times See instruction Fines 4a thro thract line 4e b. Interes 6c) 2ero)	, 0225) , 0225) , 0225) , 0225) , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 , 0225 ,	4a. 4b. 4c. 4d. 4d. 8b. 8b.	337, 333.	50 97 ered1 to 20	(Add In	e 6a an	d 6b)	46	988.47 671.48 316.99	
b. Total other incor all other incor all other income c. Total (Add Enes 3. BEDFORD CITY TA) 4. PAYMENTS AND CF a. Estimated paym year overpayme b. Withheld for Bec c. Credit for other d. Direct payments e. Total payments 5. BALANCE of tax du 6. PENALTY AND INTE a. Lete Filing: Pen 7. BALANCE DUE (con 8. OVERPAYMENT (If is 8a Refund () 9. ESTIMATED TAX (Se a. Estimated tax Re b. Outstarty estima 10. TOTAL DUE Cty of E (Make check or r HAVE YOU REC	me (Federal Sche - See Instructio 2 and 20 2 and 20 3 and 20 3 and 20 4 2.25(Mutply REDITS Beats and prior and credit (As of_ diord (From 18). cities (From	See Instruction See Instructio	. 0225)	4a. 4b. 4c. 4d. 4d. 8b. 8b. 8b.	337, 333.	50 97 eredit to 20		e 6a an 20.00	d 6b) d Tax) AMO	40	988.47 671.48 316.99 80.00 396.99	
b. Total other incor all other incor all other income c. Total (Add Enes 3. BEDFORD CITY TA) 4. PAYMENTS AND CF a. Estimated paym year overpayme b. Withheld for Bec c. Credit for other d. Direct payments e. Total payments 5. BALANCE of tax du 6. PENALTY AND INTE a. Lete Filing: Pen 7. BALANCE DUE (con 8. OVERPAYMENT (If is 8a Refund () 9. ESTIMATED TAX (Se a. Estimated tax Re b. Outstarty estima 10. TOTAL DUE Cty of E (Make check or r HAVE YOU REC	me (Federal Sche - See Instruction 2 and 20). (2 2.25(Mutriply REDITS - sents and prior ant credit (As of_ diord (From 18). cibles (From 18). cibles (From 18). cibles (From 18). and credits (Add e (overpald) sub- (REST - saty (\$25) \$_ mbine lines 6 and ne 7 is less than if \$5.00 or more) be instructions) abbitty for 20_ teled tax due 1/4 of Bedford (Add Ine) Bedford (Add Ine) Bedford (Add Ine) EVICED ANY 6 d deciras that files	See Instruction See Instructio	. 0225)	4a. 4b. 4c. 4d. 4d. 8b. 8b. 8b.	337, 333, 333, s \$	50 97 redit to 20 NO		e 6a an 20.00	d 6b) d Tax) AMO	40	988.47 671.48 316.99 80.00 396.99	